Oct 2014 – MDS Accuracy

DEPARTMENT OF HEALTH AND HOSPITALS

Health Standards Section

October 2014 training
To : Providers:
From: The Louisiana RAI Coordinator :
Jonelle L. Thompson RN LNC
Topics:

- ‘ The importance of MDS Accuracy & Using the Casper Reports.’
- Section Q – Referral to the community ‘ New directive on Local Contact Agency (LCA) as OAAS’
- Training found at ***http://www.dhh.louisiana.gov/index.cfm/directory/detail/731***

Why is Accuracy Important?

- QIES National Database – Resident table
- Billing/Claim Implications
- CASPER Reports
- Quality Measure

FACT - MDS records submitted

MDS records submitted to the

QIES ASAP System

10/01/13 – 01/31/14

6,681,061

Types of error messages

- 2 types of error messages
  - Fatal -"really bad"
    - Record is not accepted into ASAP system, i.e., rejected
    - Must correct record and re-submit 'new' record
  - Warnings -"issue" to "information alert"
    - Record is accepted into ASAP system
    - Should determine if need to address/fix something

Checking for Accuracy

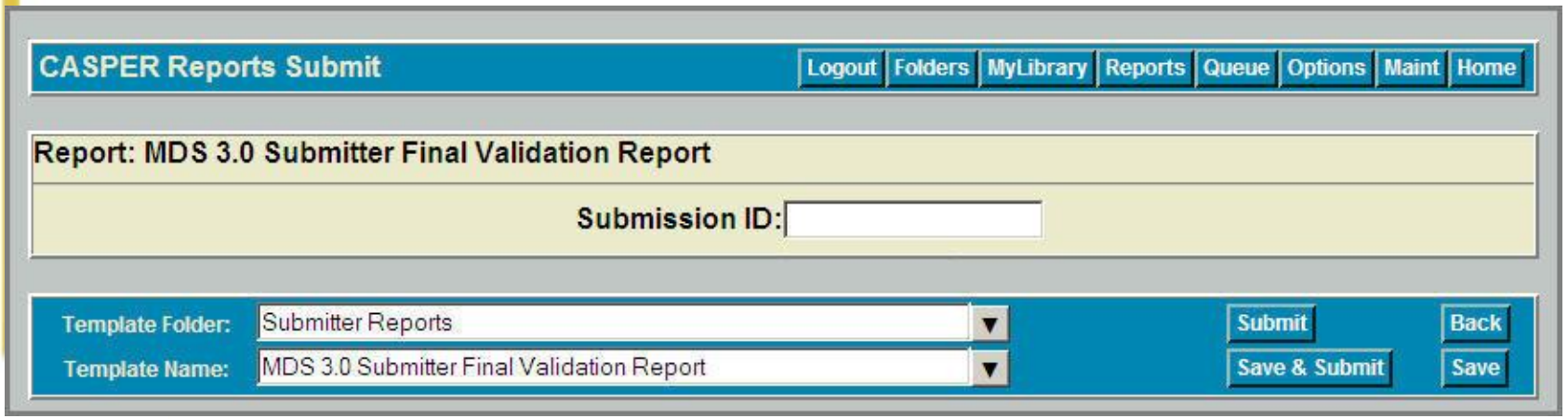
Read the Validation Report for the following errors to be proactive and troubleshoot.

- Verify the resident information
- Review all edits – Warnings
  - -1027: New Resident Created
  - NEW-1031: Resident Information Mismatch
  - -1032: Resident Provider Updated

Final Validation reports

MDS 3.0 Submitter Final Validation report

The **CASPER Reports Submit** page is presented so that you may specify the submission ID for which you wish to request a report.



Final Validation reports

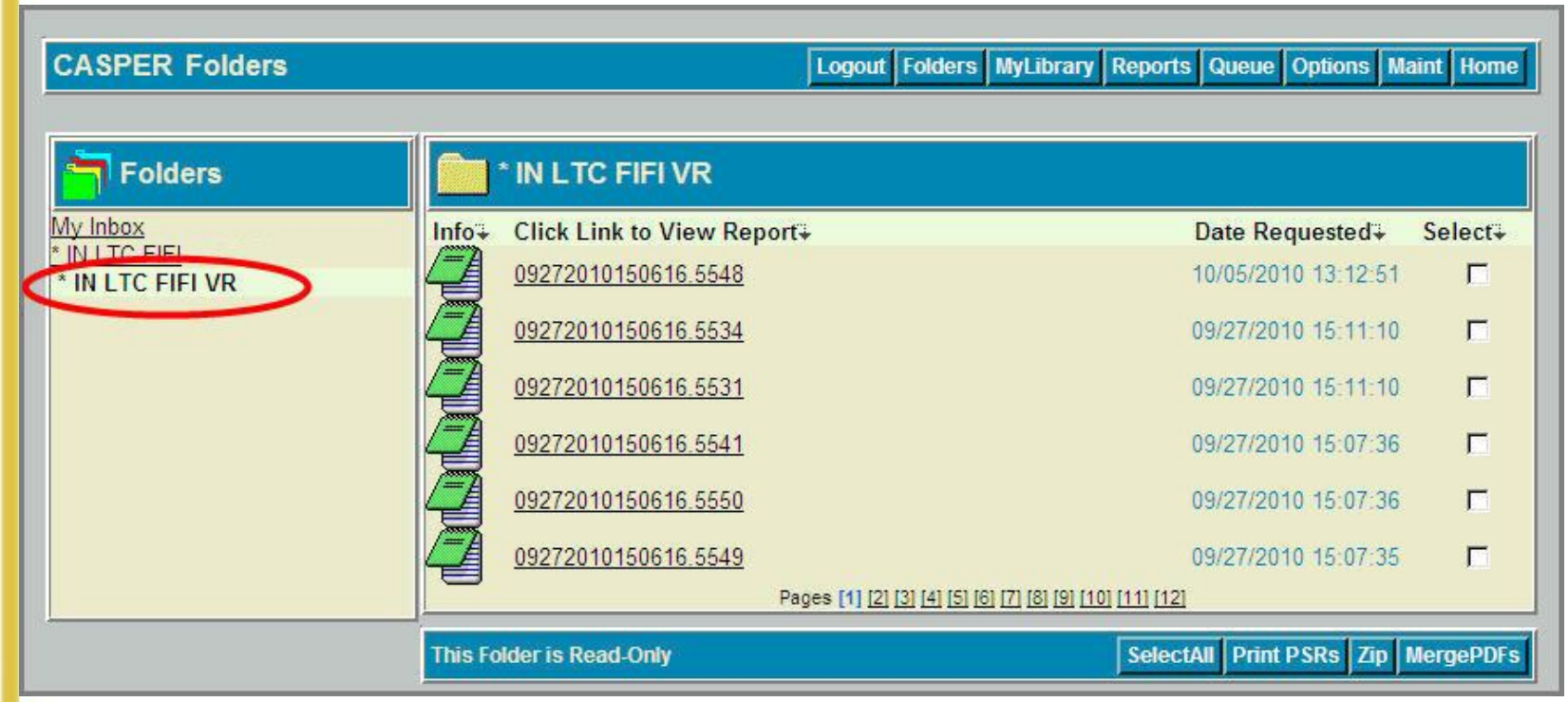
MDS 3.0 Submitter Final Validation :

If the ASAP system was unable to process one or more records of a file you submitted, you would run a Submitter FV report.

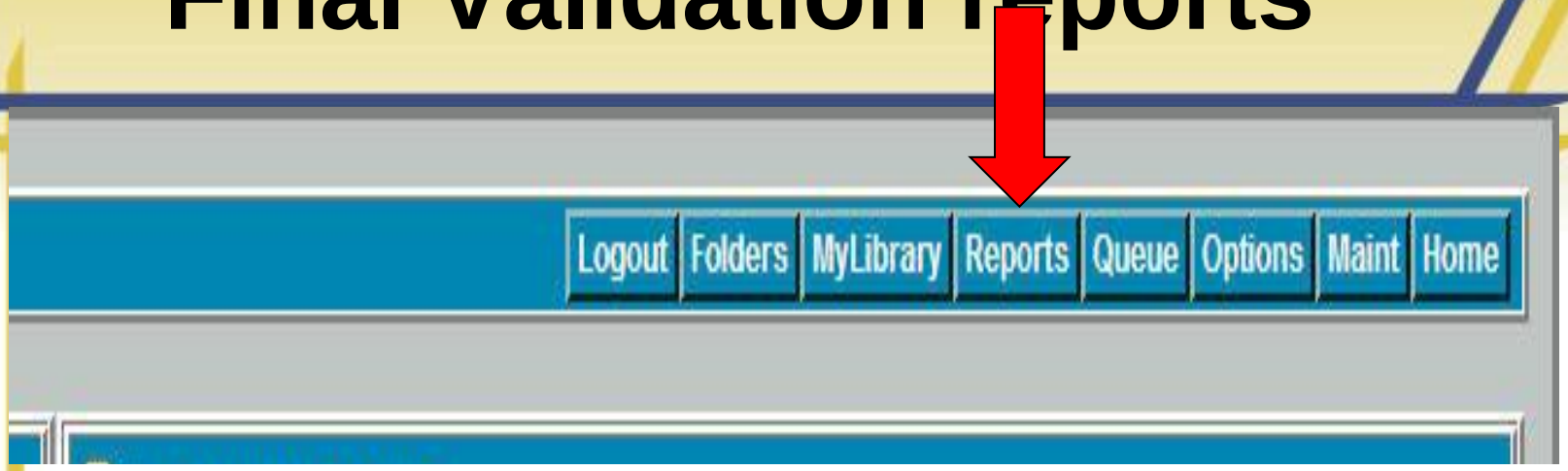
- This will identify errors so that they may be corrected; in one or more records of your submission file.

Final Validation Reports

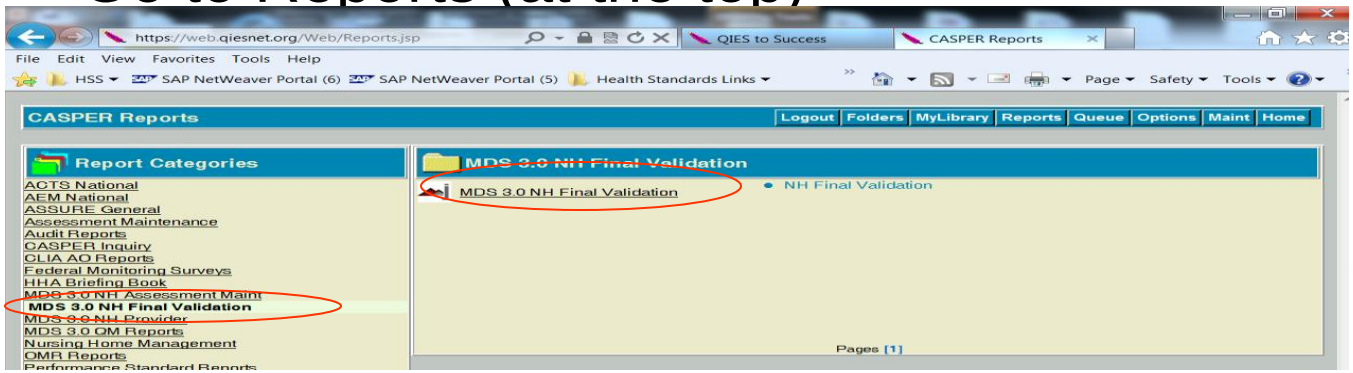
- System Generated Final Validation report.



Final Validation reports



- Can generate a FV report 24 hours after an assessment has been submitted to check.
- Go to Reports (at the top)



- Double click in center section – submit & save

Validation Report view

```
--------------------------------------------------------------------------------
Record: 1                                   Accepted

Asmt_ID: 103079389326                       Name:
Res_Int_ID: 17840422                        SSN:
A0200:   1          A0310A: 99              Target Date: 10/06/2014
A0310B: 07          A0310C:  2              A0050: NEW RECORD
A0310D:  ^          A0310E:  0              Attestation Date (X1100E):
A0310F: 10          A0310G:  1              Data Spec Version #: 1.14
Item Subset Code:          NOD
XML File Name:                              NOD_A99_B07_C2_E0_F10.xml

MDS 3.0 Item(s):                            Current Record Type, Prior Record:
                                            A0310A, A0310B, A0310F
Item Values:                                DISCHARGE RA/RNA, MDS 3.0: , ,
Message Number:                             -1018      WARNING
Message:                                    Inconsistent Record Sequence: Under CMS
                                            sequencing guidelines, the type of
                                            assessment in this record does not
                                            logically follow the type of assessment
                                            in the record received prior to this one.

--------------------------------------------------------------------------------
This report may contain privacy protected data and should not be released to
the public.
--------------------------------------------------------------------------------
```

Catagories of fatal errors

- **Facility Work Flow Errors**
  - An error due to facility processes
- **User/Software Errors**
  - An item was missed or an invalid value was entered and the notification from the software was dismissed
  - There was no notification of the issue by the software prior to submission
- **Software Errors**
  - Strictly software issues related to not following the published specifications

Top 5 Fatal errors

1. **Duplicate Assessment (-1007)** The submitted record is a duplicate of a previously submitted record
2. **Missing Item (-1030)** Based upon the Item Subset Code (ISC) submitted in this record, this item is required
3. **Invalid Value (-3676)** The value submitted for this item is not an acceptable value
4. **Inconsistent A1550 Items (-3778c)** If the resident's age is 22 years or older and A0310A does not equal 01, then A1550A through A1550Z must equal blank (^)
5. **Inconsistent A1550 Items (-3778a)** If A0310A equals 02, 06, or 99, then A1550A through A1550Z must equal blank (^)

Warning Messages

- **Warning Messages**
  - *Timing and Sequencing Messages*
  - *Informational Messages*

Informational Warnings

New

- ***Resident Information Mismatch: (-1031)***
- ***Resident Provider Updated: (-1032)***
- **RUG Inconsistency: (-3616a, -3616b, -1067, -1056)**
- **Section S Missing/Invalid Data: (-3808)**
- **Incorrect CCN: (-3695)**

Timing and Sequencing Warnings

- **Late Assessment (-3749a-e, -3810a-e, -1040)**
  - Completed late
  - Submitted late
- **Inconsistent Record Sequence (-1018)**
  - Did not complete an entry record
  - Did not complete/submit a discharge record
  - Did not complete/submit a required assessment
- ***New resident & No Matching Entry Record (-1027)***
  - *This subsequent MDS record does not match any resident's identifying information already stored in the QIES ASAP System*

Top Warnings

1. -3806 Inconsistent A0100C

- The value submitted for A0100C (State Provider Number) does not match the State Provider Number in the QIES ASAP System for the provider identified by the FAC_ID in the file.

2. -1031 "Resident Information Mismatch" (New)

- Submitted values for the items listed do not match the values in the QIES ASAP database. If the record was accepted, the resident information in the database was updated . Verify that the new information is correct"

3. -1032 Resident Provider Updated

- Our records indicated that a different provider previously cared for this resident. The provider associated with this resident was updated. Please verify.

Accuracy is important

- Be proactive in verification of assessment accuracy
- Verify accuracy of assessments before they are submitted
- Make the Casper Reports work for you
  - Proactive approach
  - Trouble shooting

Resident ID

- **A Resident ID** - is created initially from the resident-identifying information included in the first record submitted for that resident.
- Ideally, only one resident record exists for each resident. Subsequent assessment records for the resident are then associated with that resident record by means of the **Resident Match process**.

How Do Residents Match?

- Submitted items used to identify a resident
  - State
  - Facility Internal ID
  - Social Security Number
  - Last Name
  - First Name
  - Date of Birth
  - Gender

No Match?

- If the identifying information in the record is not sufficiently similar to an existing Resident ID, a new resident record is created in the Resident table and the record is associated with that new Resident ID.

Using the Casper Reports

- Some of the MDS 3.0 reports can be found in the following report categories:
  - MDS 3.0 NH Provider
  - MDS 3.0 NH Final Validation
  - MDS 3.0 SB Final Validation
  - MDS 3.0 QM Reports

Welcome to the CMS MDS 3.0 System!

Reminder: The MDS 3.0 System may be down for maintenance the third Sunday of each month. If you experience any problems submitting or retrieving reports, please try again on Monday.

MDS 3.0 Submissions

MDS 3.0 Submissions Helpful Hints Posted 11/04/2010

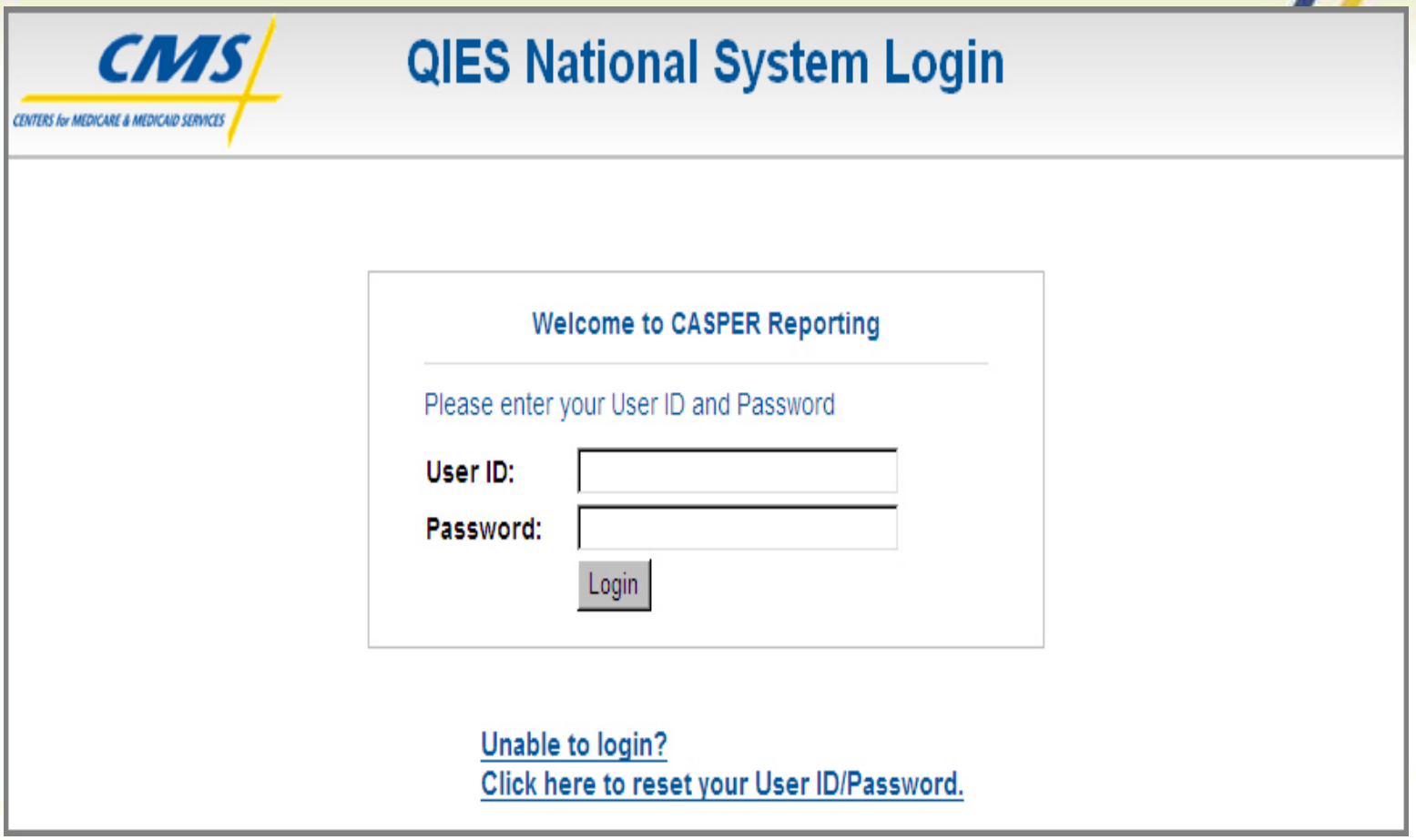
MDS 3.0 Provider User's Guide [Choose the Section] Select

CASPER Reporting Users Manual: [Choose a Section] Select

CASPER Reporting - **Select this link to access the Final Validation and Provider reports.**

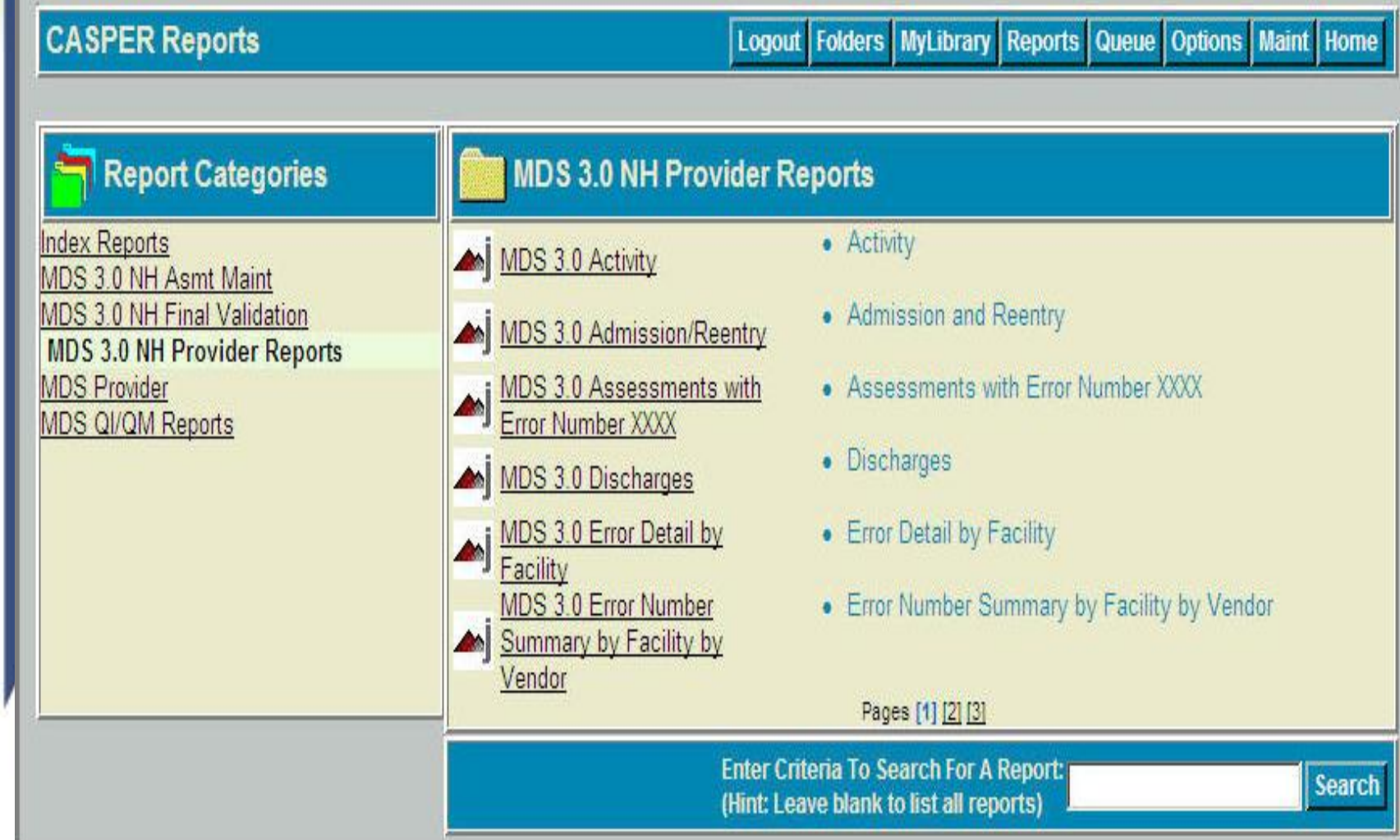
QIES User Maintenance Application User's Guide

Accessibility Policy | Privacy Policy | Help


CMS
CENTERS for MEDICARE & MEDICAID SERVICES
QIES National System Login
Welcome to CASPER Reporting
Please enter your User ID and Password
User ID:
Password:
Login
Unable to login?
Click here to reset your User ID/Password.

MDS 3.0 NH Provider Reports that can help troubleshoot.

- MDS Activity Report (page 1)
- MDS Missing Assessment Report (pg2)
- MDS Roster Report (pg 2)


CASPER Reports
Logout
Folders
MyLibrary
Reports
Queue
Options
Maint
Home
Report Categories
Index Reports
MDS 3.0 NH Asmt Maint
MDS 3.0 NH Final Validation
MDS 3.0 NH Provider Reports
MDS Provider
MDS QI/QM Reports
MDS 3.0 NH Provider Reports
MDS 3.0 Activity
MDS 3.0 Admission/Reentry
MDS 3.0 Assessments with Error Number XXXX
MDS 3.0 Discharges
MDS 3.0 Error Detail by Facility
MDS 3.0 Error Number Summary by Facility by Vendor
Activity
Admission and Reentry
Assessments with Error Number XXXX
Discharges
Error Detail by Facility
Error Number Summary by Facility by Vendor
Pages [1] [2] [3]
Enter Criteria To Search For A Report:
(Hint: Leave blank to list all reports)
Search

Activity Report

- This report lists the accepted assessments, tracking records, and inactivation requests that were submitted by a facility during a specified timeframe.
- From mm/dd/yyyy to mm/dd/yyyy

MDS 3.0 Activity

Run Date: 12/02/2011 Page 2 of 2

CASPER Report
(NV) MDS 3.0 Activity
from 11/01/2011 thru 11/30/2011

Nursing Home
Facility ID: NVS3330SNF
Facility Name: MOUNTAINVIEW CARE CENTER
Facility City: BOULDER CITY

Res. Intrnl ID/ SSN	Resident Name	DOB	Gender	A0310 A/B/C/D/F/G	ISC	Target Date	Subm Date	CALC MCR RUG	CALC MCD RUG	A0050	X0800	X1100E
20274223 [redacted]	OKAMI23, [redacted]	[redacted]	M	01/01/0/^/99/^	NC	11/23/2011	11/30/2011			1		^
20274225 [redacted]	OKAMI25, [redacted]	[redacted]	M	01/01/0/^/99/^	NC	11/25/2011	11/30/2011			1		^
20274183 [redacted]	OKAMI3, [redacted]	[redacted]	M	01/01/0/^/99/^	NC	11/03/2011	11/29/2011			1		^

This report may contain privacy protected data and should not be released to the public.

Missing OBRA Assessment Report What is on it?

- A list of the residents with the most recent OBRA assessment target date being >138days prior to the run date. (excluding discharges or deaths).
- A list of residents that have had no OBRA assessment for a current episode that began >60 days ago.
- If no OBRA assessments can be displayed then the latest PPS assessment will be displayed.

MDS 3.0 Missing OBRA Assessment report

Run Date: 04/25/2011

CASPER Report
(NV) MDS 3.0 Missing OBRA Assessment

Nursing Home
Facility ID: NVS1212SNF
Facility Name: TORREY PINES CARE CENTER
Facility City:

Resident Identifiers:					Last Record Identifiers:		
Resident Internal ID	Resident Name	SSN	Date of Birth	Gender	OBRA A0310A	PPS A0310B	Target Date
17779112	RETEST10114, SUBMITTER	[redacted]	04/29/1968	M	99	05	10/11/2010
17779080	RETEST10117, SUBMITTER	[redacted]	04/29/1968	M	99	06	10/11/2010
17779078	RETEST10121, SUBMITTER	[redacted]	12/01/1965	F	99	07	10/11/2010
17779079	RETEST10122, SUBMITTER	[redacted]	12/01/1965	F	99	07	10/11/2010
17779111	RETEST10127, SUBMITTER	[redacted]	11/05/1931	M	99	07	10/11/2010
17780730	WALDO10241, NURSINGHOME	[redacted]	12/01/1965	F	99	07	10/11/2010

This report may contain privacy protected data and should not be released to the public.

MDS Roster report

- A list of residents currently in the facility (Ideally).
- Only as current as the most recent assessments submitted
- A good check source to compare Resident Internal ID #’s with the ID # seen on the Validation Report and/or the Missing assessment report.

MDS 3.0 Roster

Run Date: 12/21/2011

CASPER Report
(NV) MDS 3.0 Roster

Nursing Home
Facility ID: NVS3330SNF
Facility Name: MOUNTAINVIEW CARE CENTER AT BOULDER CITY
Facility City: BOULDER CITY
Date of Last Facility Production Submission: 9/1/11 3:41 PM

Resident Internal ID	SSN	Resident Name	DOB	Gender/ Race/Ethnicity	ISC	A0310A/A0310B A0310C/A0310F	Target Date	Submission Date	Admission Date	Admission Type
17793875	[redacted]	OKAMI1, [redacted]	[redacted]	F F	NC	03 / 03 / 1 / 99	07/06/2011	09/01/2011	07/06/2011	Admission
17793876	[redacted]	OKAMI2, [redacted]	[redacted]	F F	NC	01 / 01 / 3 / 99	11/01/2010	09/01/2011	11/01/2010	Admission
17793877	[redacted]	OKAMI2, [redacted]	[redacted]	M F	NQ	02 / 99 / 0 / 99	02/01/2011	09/01/2011	02/01/2011	Admission
17792658	[redacted]	QURRIS60, [redacted]	[redacted]	F F	NC	03 / 01 / 3 / 99	08/22/2011	09/01/2011	08/22/2011	Admission
17793737	[redacted]	RABBLE4ZZ, [redacted]	[redacted]	F F	NC	01 / 07 / 2 / 99	07/16/2011	08/29/2011	07/16/2011	Admission
17784734	[redacted]	WALCARPET900000, [redacted]	[redacted]	M A	NC	01 / 99 / 0 / 99	10/01/2010	10/07/2010	09/25/2010	Admission

Total Residents = 6

This report may contain privacy protected data and should not be released to the public.

One Scenario: “I did the Discharge!”

- Hello, State Coordinator??
- I have these people on my *Missing Assessment Report* and I know I did their discharge. Now my corporate nurse is telling me to fix it, and I can’t figure out why they are showing up!
- I have the Validation Reports, and **I did the discharge!!**
- Obviously, the CASPER report is **wrong!!!**

Scenario (cont.)

- The Missing Assessment report shows the **last** MDS that CMS got for that Resident ID - so if providers *compare resident IDs* on the Validation Report and the Missing Assessment Report, they can see that the mysteriously disappearing discharge is for a different ID!

Yes, I see the error!

Thank You!

Item Q0500

Return to Community

(Do you want to talk to someone about the possibility of leaving this facility and returning to live and receive services in the community?)

Q0500B Coding Instructions

- Document whether the resident, family, or significant other wants to talk to someone about returning to the community.
  - **Code 0, No:** if the resident (or family or significant other, or guardian or legally authorized representative) states that he or she does not want to talk to someone about the possibility of returning to the community.
  - **Code 1, Yes:** if the resident (or family or significant other, or guardian or legally authorized representative) states that he or she does want to talk to someone about the possibility of returning to the community.
  - **Code 9, Unknown or uncertain:** if the resident cannot understand or respond and the family or significant other is not available to respond on the resident's behalf and a guardian or legally authorized representative is not available or has not been appointed by the court.

Section Q

- **Item Q0500B must be asked on all comprehensive assessments.**
- Item Q0550 allows them to opt-out of being asked Q0500B on quarterly assessments.
- If there is a notation in the clinical record that the resident does not want to be asked again, and this is not an annual, comprehensive assessment - skip to item Q0600, **referral**.

Q0500 Assessment Guidelines

- The intention is to allow a resident his or her right to explore all services options.
- Answering “Yes” is a request for more information made by the resident.
- Answering “Yes” does not commit the resident to leave the nursing home at a specific time, or at all.

When an individual responds "YES" to question Q0500B

- The facility is required to make a (referral) to the Local Contact Agency (LCA).

- The Office of Aging and Adult Services (OAAS) Regional Offices - will serve as the LCA.

New referral form OAAS-PF-13-016

- Effective August 21, 2014, facilities will be required to send (form no. OAAS-PF-13-016) via Right Fax (secured fax) to the **OAAS Regional Office in the facility's area**.
- A fillable PDF version of the form can be found on the OAAS website or the MDS Section Q0500 link on the DHH/HSS MDS program page at:
- http://www.dhh.louisiana.gov/index.cfm/directory/detail/731

Item Q0600

Referral

(Local contact agencies)

Q0600 Coding Instructions

- Document whether a referral has been made to a local contact agency.
- The LCA is the OAAS office in the area of the facility.

Referral Question Follow-up

- If a referral has not been made, NH is to conduct additional information gathering and assessment to determine why.
- Care Areas Assessment is a checklist that assists NH to do further assessment.
- If assessment shows that a referral should have been made and resident wants to talk to someone about community care, referral is initiated.